FOLM PRO-LINE U.S. DEFAULT OF DOUBLESCE						Pag	Page 1 of 1			
LIST OF DOCUMENTS CITED BY APPLICANT (Use several sheets if necessary)					ATTY DOCKET NO. SERIAL NO.					
					35185/41485 Not yet assigned 10/660610					
					APPLICANT					
	(036	several sheets ly neces	Volker LABACH							
					FILING DATE GROUP					
					Herewith	h Not yet assigned				
			U.S. PATI	ENT D	OCUMENTS	·				
EXAMINER INITIAL		DOCUMENT NUMBER	DATE	······································	NAME	CLASS	LASS SUBCLASS FILING DATE			
	AA		i					1		
	AB				***		\	1		
	AC	<u> </u>			•		<u> </u>	1		
	AD									
	AE							lacksquare		
 .	AF						 	1		
	AG	<u> </u>			• •			1		
	AH	<u> </u>						\vdash		
	AI							1		
	AJ		1						· · · · · · · · · · · · · · · · · · ·	
	AK							╅──	· · · · · · · · · · · · · · · · · · ·	
	AL		1					 		
	AM	 					-	+		
	AN		\	· · · · · · · · · · · · · · · · · · ·		<u> </u>	-	1		
	AO		1					-		
	AP					_		 		
	H	FO	REIGN PA	ATENT	r documen	TS		<u></u>		
EXAMINER	γ	DOCUMEN'T NUMBER	DATE	T	COUNTRY	CLASS	SUBCLAS	TRANSLATION		
INITIAL					COONTRI	CLASS	s	YES	NO	
	ΛQ	DE 197-15-265 C2	08/1999	-GEIGN	ANY					
	AR	DE 29 30 306 C2	12/1985	GEIGVI	AIN,I					
	AS	<u> </u>						~		
- ·	AT									
	AU		ļ							
	AV						ļļ			
	AW								-	
	•	OTHER PRIOR AR	T (Includin	g Autho	or, Title, Date l	Pertinent F	Pages, Etc.))		
	AX			·						
	AY									
-	 			-						
<u> </u>	AZ				ı					
EXAMINER:					DATÉ CONSIDERED	:				
*EXAMINER:	Initial if	reference considered, wheth considered. Include copy of	her or not cita	ition is in	conformance with	MPEP 609;	Draw line thr	ough ci	tation if not in	